

COMMITTEE REPORT

MADAM PRESIDENT:

The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 133, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

1 Page 1, line 3, after "advance" insert "**directive**", for purposes of
2 **IC 16-36-1.5 and IC 16-36-1.7, has the meaning set forth in**
3 **IC 16-36-1.7-1."**

4 Page 1, delete lines 4 through 17.

5 Page 2, delete lines 1 through 3.

6 Page 2, line 24, delete "directive." and insert "**directive executed**
7 **under IC 16-36-1.7.**

8 SECTION 3. IC 16-36-1.7 IS ADDED TO THE INDIANA CODE
9 AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY
10 1, 2004]:

11 **Chapter 1.7. Psychiatric Advance Directives**

12 **Sec. 1. As used in this chapter, "psychiatric advance directive"**
13 **means a written medical directive that expresses the individual's**
14 **preference and consent to or refusal of the administration of**
15 **treatment measures for a specific diagnosis for the care and**
16 **treatment of the individual's mental illness during subsequent**
17 **periods of incapacity.**

18 **Sec. 2. (a) An individual who has capacity may execute a**
19 **psychiatric advance directive.**

(b) The psychiatric advance directive must include the following:

- (1) The name of the individual entering into the psychiatric advance directive.
- (2) The name of the treatment program and the sponsoring facility or institution in which the individual is enrolled, if applicable.
- (3) The name, address, and telephone number of:
 - (A) the individual's treating physician; or
 - (B) other treating mental health personnel.
- (4) The signature of the individual entering into the psychiatric advance directive.
- (5) The date on which the individual signed the psychiatric advance directive.
- (6) The name, address, and telephone number of the designated health care representative.
- (7) The signature of the psychiatrist treating the individual entering into the psychiatric advance directive, attesting to:
 - (A) the appropriateness of the individual's preferences stated in the psychiatric advance directive; and
 - (B) the capacity of the individual entering into the psychiatric advance directive.

(c) The psychiatric advance directive must comply with and is subject to the requirements and provisions of IC 16-36-1.

Sec. 3. An individual may specify in the psychiatric advance directive treatment measures, including:

- (1) the administration of prescribed medication:
 - (A) orally; or
 - (B) by injection;
- (2) physical restraint;
- (3) seclusion;
- (4) electroconvulsive therapy; or
- (5) mental health counseling;

for the care and treatment of the individual's mental illness during a period when the individual is incapacitated.

Sec. 4. A person who:

- (1) treats an individual who has executed a psychiatric advance directive; and
- (2) is not aware that the individual being treated has

1 **executed a valid psychiatric advance directive;**
2 **is not subject to civil or criminal liability based on an allegation**
3 **that the person did not comply with the psychiatric advance**
4 **directive.**

5 **Sec. 5. An attending physician may deviate from the psychiatric**
6 **advance directive when treating an individual if the attending**
7 **physician believes in good faith that the deviation is in the best**
8 **interest of the patient or another individual.**

9 SECTION 4. IC 34-30-2-71.5 IS ADDED TO THE INDIANA
10 CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE
11 JULY 1, 2004]: **Sec. 71.5. IC 16-36-1.7-4 (Concerning a person who**
12 **is not aware of, and does not comply with, a psychiatric advance**
13 **directive).".**

14 Renumber all SECTIONS consecutively.
 (Reference is to SB 133 as introduced.)

and when so amended that said bill do pass .

Committee Vote: Yeas 8, Nays 0.

Senator Miller, Chairperson